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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/105,255 06/26/1998 PAT 6,725,483  
and is a CIP of 08/792,881 01/31/1997 PAT 5,966,760

*D.J.*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None D.C.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 08/09/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	OH	8	22	3
Verified and Acknowledged Examiner's Signature / Initials					

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## TITLE

Apparatus and method for upgrading a hospital room

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